PTC/SB/06 (08-03)
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to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875						Application or Doctor Number #0/808/33		
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED		NUMBER EXTRA		RATE	FFE		RATE	FEE
BASIC FEE (37 CFR 1.18(e))					885	OR		\$
TOTAL CLAIMS (37 CFR 1.18(c))  7 minus 20 =				x :		OR	x 8°	
INDEPENDENT CLAIMS (37 CFR 1.18(b))	minus 3 = *		x 3		OR	x 8 = ·		
MARTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(4))			1,		OR	+\$0	•	
" If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL	385	OR	TOTAL	
CLAIMS AS AMENDED - PART II								
						OR	OTHER	
(Column		(Column 2)	(Column 3)	SMALL EI			SMALL	
< //an REMAR	ING P	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE	;	RATE	ADDI- TIONAL FEE
Total //	Minus	20	. 9	x 8		OR	x s	
Total (properation) (Properati	Minus	3	° 0	x 9		OR	x se	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 GFR 1.18(d))				+		OR	+5=	
1 2 /				ADD'L FEE		ÓR	TOTAL ADD'L FEE	
1/2-8-0	$\boldsymbol{\wp}$	(Column 2)	(Cotumn 3)					
CLAIR	AS . IBNG IR .	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total V (POR 1.140)	) Minus	20		X 8=		OR	x &e	
Z AFTE AMENDE TOTAL STATE OF A ST	Minus	-3	• —	x ss	$X \subseteq X$	OR	x 8•	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))				+ 5=	X	OR	+1 ==	
1 ( )					$\Delta$	OR	TOTAL ADD'L FEE	
(QY) (Column 1) (Column 2) (Column 3)								<u></u>
O ( CLAI REMAN AFTI Z AMEND	IBNG R	HIGHEST NUMBER. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE/
Total AMEND	Minus	30	- /	× 3 •		OR	x s=	
Total AMEND  Total or ora 1.18(d) / C	Minus	7	- /	X 8 a		. OR	x s=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1/6(4))				+3		OR	+: /-	
				TOTAL ADD'L FEE		OR	ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "J".  The "Highest Number Previously Paid For" (Total or tridependent) is the highest number found in the appropriate box in column 1.								

The "Highest Number Previously Pold For" (Total or independent) is the highest number found in the appropriate box in couring 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to site (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to compiste, uncluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments in the around of time you require to complete this term and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent on the around of time you require to complete this term and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Tindemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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